

HARNES, DICKEY & PIERCE, P.L.C.

Attorneys and Counselors
5445 Corporate Drive, Suite 400
Troy, Michigan 48098-2683
Phone: 248-641-1600
Fax: 248-641-0270
St. Louis, MO • Washington, D.C.

RECEIVED
CENTRAL FAX CENTER

MAY 04 2004

OFFICIAL

DATE: May 4, 2004

NO. OF PAGES (INCLUDING THIS PAGE):

11

FOR: Examiner Robert Muromoto - Art Unit 3765

COMPANY: U.S. Patent and Trademark Office

FAX NO.: (703) 872-9306

PHONE:

ORIGINAL WILL FOLLOW BY:

☐ REGULAR MAIL☐ OVERNIGHT MAIL☐ COURIER☒ WILL NOT FOLLOW

FROM: Monte L. Falcoff

Please let us know by phone or fax if you do not receive any of these pages.

COMMENTS:

U.S. Serial No. 10/668,614 -- Filed: September 23, 2003

For: METHOD FOR WEAVING AN AIRBAG

Our Reference: 8358-000010

Please find attached a Transmittal Form, an Information Disclosure Statement, Form HDP-1449 (1 sheet) and 1 Other Document for the above-identified application.

*** NOTICE ***

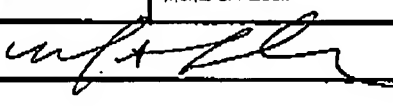
The information contained in this telefax transmission is intended only for the individual to whom or entity to which it is addressed. It may also contain privileged, confidential, attorney work product or trade secret information which is protected by law. If the reader of this message is not the intended recipient, or an employee or agent responsible for delivering the message to the addressee, the reader is hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original message to us at the address above via the U.S. Postal Service. We will reimburse you for any reasonable expense (including postage) for the return of the original message.

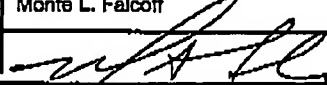
FTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/668,614
	Filing Date	September 23, 2003
	First Named Inventor	T. Eschbach
	Art Unit	3765
	Examiner Name	R. Muromoto
Total Number of Pages in This Submission	Attorney Docket Number	8358-000010

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below)</i> Form HDP-1449 (1 Sheet); 1 Other Document		
<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0760. A duplicate copy of this sheet is enclosed.</td> </tr> </table>			Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0760. A duplicate copy of this sheet is enclosed.
Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0760. A duplicate copy of this sheet is enclosed.			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm or Individual name	Harnes, Dickey & Pierce, P.L.C.	Attorney Name Monte L. Falcoff		
Signature				
Date	May 4, 2004			

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Monte L. Falcoff	Express Mail Label No.	
Signature		Date	May 4, 2004

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.